PATENT APPLICATION FEE DETERMINATION RECO										Application or Docket Number  08/834050			_
Effective October 1, 1996													R THAN
CLAIMS AS FILED - PART I (Column 1) (Column 2)								:	SMALL ENTITY		OR		ENTITY
FOR	l		NUMBER FILED			NUMBER EXTRA			RATE	FEE		RATE	FEE
BASI	C FEE									385.00	OR	*	770.00
тот	AL CLAIMS		3	<u>Minu</u>	s 20 = * / O		X	\$11=		OR	x\$22=	220	
INDE	PENDENT CL	AIMS	minus 3 =			= *			x40=		OR	x80=	80
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2								<b></b>	TOTAL		OR	TOTAL	1.070.0
CLAIMS AS AMENDED - PART II											00		R THAN
		(Colun			<del>, `</del>	olumn 2) GHEST	(Column 3)	1 —	SMAL	L ENTITY	OR 	SMALL	ENTITY
AMENDMENT A		REMAI AFT AMEND	ER		PRE	UMBER VIOUSLY ND FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 3	0	Minus	**	20	= 10	x	\$11=		OR	x\$22=	220
	Independent	* &	1	Minus	***	<u> </u>	= /	×	40=		OR	x80=	80
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								130=		OR	+260=	
(Column 1) (Column 2) (Column 3)									TOTAL		OR ,	TOTAL ADDIT. FEE	300 pairl
AMENDMENT B		CLAI REMAI AFT AMEND	IMS INING ER		HI NI PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*2	3	Minus	** 30		= _ ]		\$11=		OR	x\$22=	
	Independent	. 0	3	Minus	***	4	=	X	40=		OR	x80=	
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								130=		OR	+260=	
(Column 1) (Column 2) (Column 3)									TOTAL IT. FEE		OR ,	TOTAL ADDIT. FEE	
AMENDMENT C		CLAI REMAI AFT AMEND	NING ER		NI PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=	x	\$11=		OR	x\$22=	
	Independent	*		Minus	***		=	×	40=		OR	x80=	
٨	FIRST PRES	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
Th	e "Highest Num	ber Previo	usly Paid	For" (Total or	Indepe	ndent) is the h	iahest number fo	und in th	he appr	opriate box in o	olumn 1	1.	